

EXHIBIT PP

From: [Paquette, Maggie \(DOC\)](#)
To: [CoyneFague, Patricia \(DOC\)](#); [Wall, AT \(DOC\)](#); [Weeden, James \(DOC\)](#); [Weiner, Barry](#)
Subject: HCS Managers Minutes
Date: Thursday, September 18, 2014 9:02:48 AM
Attachments: [Healthcare Services Managers Meeting 8.28.14 final.docx](#)
[Healthcare Services Managers Meeting 8.7.14 Final.docx](#)

Attached are the Health Care Services Managers Minutes for the two meetings held in August.

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Healthcare Services Managers Meeting
August 7, 2014
Minutes

Present: Fred Vohr, MD MPD; Joseph Marocco, Assoc. Director HCS; Louis Cerbo, Clinical Director Behavioral Health; Gordon Bouchard, DON; Pauline Marcussen, IPM Health Information; Patricia Threats, PHES; Michelle Branch, Supervising Psychologist; Barry Weiner, Acting AD Rehabilitative Services.

Excused: Lauranne Howard, Substance Abuse Coordinator
Recorder: Maggie Paquette

The meeting was convened at 13:30.

Public Health Education: Ms. Threats

There are two active MRSA cases at Medium. Treatment was provided; Dr. Flanigan followed up and reordered repeat testing for one case.

Overdose prevention is ongoing at WF, Men's-Min, Med, and Max. A new initiative to provide Narcan to individuals upon discharge and a meeting will be convened to finalize.

There is an increase of STDs presenting at Intake facilities. Ms. Threats will speak with Dr. Clarke to discuss incorporating STD testing upon commitment. Ms. Threats and Ms. Davis meet and educate inmates on infectious diseases.

HCV:

One OOS CT inmate housed at Max began Solvaldi treatment on July 2 and a recent viral load taken on July 25 revealed a non-detectable viral load. This individual will continue treatment for 8 more weeks. He recently reported minimal side effects to treatment and was seen by Dr. Blanchette this morning and referred to behavioral health. Ms. Threats serves as the liaison to inmates and will meet and educate them on our treatment process. Two RIDOC inmates will be started on treatment this month. The next clinic with Dr. Poshkus will be held August 25.

Dr. Vohr asked if Ms. Marcussen had any news from Medicaid regarding covering HCV treatment. Pauline will reach out to Deb Florio and Elena Nicolella at DHHS to find out if the Medicaid addendum to include HCV treatment was signed.

Behavioral Health: Dr. Cerbo

MP from HSC is on a hunger strike. He was transferred to ISC. He has not taken any food for 5-6 days but is hydrating.

DG from HSC is non-compliant with treatment. Dr. Burgard is hesitant on obtaining a PFI to force medicating. Dr. Wall from Forensics will see him and he may possibly need transfer to their unit. Currently the forensic unit overflow is being sent to ESH. At the Governors Council Tuesday it was noted the forensic crunch is being felt across the country and not just here in RI.

Dr. Cerbo will contact Dr. Kaufmann who was interviewed for a possible part time contract psychiatrist for ISC. He will be scheduled to shadow Dr. Bauermeister and Dr. Cerbo will discuss with Mr. Marocco the particulars to get him on board. He works at the VA and also at Harrington Hall. It would be ideal if he could provide weekend coverage at ISC.

There will not be any psych coverage during this long weekend. CNS Hughes will not be in and Dr. Bauermeister is not working the holiday. August is noted to be a slim month for behavioral health coverage due to vacations.

Dr. Cerbo has been conducting Thinking for Change group twice a week at Medium. This 12 week program is ending.

GT will be discharged today. She is being released on personal recognizance. This news was surprising and a discharge plan was not developed as such information was conveyed this morning to Ms. Branch.

Substance Use Disorder Treatment: Dr. Cerbo

Ms. Howard was excused however provided the following report.

The issues that were raised regarding the Damiano Foundation Student Intern Project at Intake have been addressed. A meeting revealed that this project as it stands does not require IRB or MRAG approval. Several suggestions were made relative to tweaking the release that was developed. The Interns will complete the final 40 assessments that are needed to reach the goal of 200 assessments. This must be completed this week in order to begin data analysis and have the project completed by the third week in August.

The RI General Assembly transferred all Medicaid-funded behavioral health service to EOHHS on July 1, 2014. BHDDH no longer funds Substance Use Disorder Treatment Service in the community.

“This amounts to \$60,000,000 because \$10,000,000 of last year’s \$70,000,000 was taken out of the budget. The \$10,000,000 cut to the behavioral health Medicaid budget means that there is no more state money to match the CNOMs, so no more coverage for treatments not covered by Medicare or for those who are uninsured or underinsured. This may leave up to 1000 individuals uncovered. BHDDH and EOHHS are working on ways to minimize the effects of this Problem”.

EOHHS and BHDDH have identified a stakeholder to provide input into the re-design of the current behavioral health benefit with the goal of integrating the behavioral health benefits with the physical health benefit. They have created a stakeholder workgroup to develop a charter, vision, goals, and objectives. Ms. Howard has been asked to serve on this workgroup and has attended one meeting to date.

Recovery Rally List of Upcoming Events

- 8/29/14 - Kick- Off at Barry Hall 10-12
- 9/17/14 - Men’s Med 8:45 a.m. not public
- 9/17/14 - Men’s Min 2:30-4:00 not public
- 9/23/14 - Women’s Med 1:00 p.m. not public
- 9/30/14 - Women’s Min 10:00 a.m., public event

Health Care Administration: Mr. Marocco

HVAC:

Mr. Marocco sent a memo to Mr. Feole in maintenance requesting recommendations on a brand and model of portable AC units HCS could purchase from Grainger for medication rooms. Mr. Feole has not responded to Mr. Marocco’s request and Mr. Marocco has reached out again to try to resolve this issue. Mr. Feole previously stated that facilities electrical systems cannot support all portable AC unit options.

Contract Updates:

- 1) The Pharmacy RFP process has closed. The cost proposal is now in Mr. Marocco’s office with the two top contenders are neck in neck. By the end of next week Mr. Marocco will have recommendations for a vendor to DOA.
- 2) Dental Service RFP. The technical review committee met and only two of the three proposals were acceptable based on the RFP requirements. The cost proposals will need to be reviewed.

3) The Optician RFP and the MH Discharge Planning RFP have not been posted but are either at DOA or in the process of being processed within the department.

Update:

CODAC called Mr. Marocco last week and was concerned about the expenditure for Methadone to date. Mr. Rizzi was mistaken and the issue has resolved.

There has been a tremendous increase of Methadone use at the DOC as more insurers are covering MAT. Methadone is often continued at WF due to short stay sentences.

Dental Services: Mr. Marocco

Ms. Waters, a dental assistant tripped and fell on equipment lines. She remains out of work and has submitted Worker's Compensation paperwork.

A brief synopsis of this unit was provided for Acting AD Weiner. Dental services runs on 11 FTEs, of which 9 are filled by contracted Dentists, Dental Hygienists and Dental Assistants and 2 FTEs being State employed dental assistants. Three to four dentists work part time and Mr. Marocco is not happy with some but knows they would be hard to replace. The contract oral surgeon provides excellent service.

Very little restorative dental work is being performed. Each inmate is afforded a yearly cleaning which is scheduled during their birth month. The dental service has barely kept up with the work in some buildings and historically dental leadership was nonexistent. It has been difficult to recruit a new chief primarily due to low salary and the dysfunction of the unit.

The Dental hygienist schedule was distributed last week and Warden Dwyer commented on the lack of services to WF. The Warden was pleasantly surprised to learn that they were all caught up at WF, hence, the decrease in time scheduled there.

Nursing: Mr. Bouchard

Staffing: 3 nurses are out on long term leave. Nurse Maloney will be returning on Tuesday.

The two new nurses will be online 3-11p starting August 25. Arbitration occurred for one nurse who was terminated after 5 years on workers comp who she will be returning to the job; HR and Legal need to work on a return to work date.

Mr. Bouchard along with Dep Warden McCaughey will begin reviewing NP Warren's special need requests for inmates at Medium and will explain to NP Warren why certain requests she is making are being denied.

A transgender individual at ISC who has been housed in the dispensary in Admin Status will be transferred to population-JMod. This individual states they were a victim of a previous sexual assault in PA DOC system.

Discharge prescriptions are at issue as the discharge planners spend a lot of effort obtaining scripts for inmates and then only 1 in 20 scripts are ever picked up. Mr. Bouchard would like this process stopped and considers it is a waste of time. It is unknown if inmates even know that they have scripts to pick up and where they would obtain. It was proposed that an exit center be developed, possibly near inmate accounts. Mr. Bouchard stated inmates have a 5 hour window on their discharge day and should be going through an out process during this time. AD Weiner will address with Ms. Foley and Administration.

HVAC: Temperatures remain steady in the medication rooms. The warm days have not come to a close and not having back up air conditioning for medication rooms are still a major concern.

Medical: Dr. Vohr

Inmate Status: 3 inmates are hospitalized; one will be discharge back to the DOC today.

Audits: Some of Minimum audit has occurred but all is not complete; Medium audit is complete and sitting on Dr. Vohr's desk; this will be distributed to managers.

HCV: The HCV committee has met and discussed the Federal Bureau of Prisons guideline, the CDC's recommendations and the Infectious Disease Society's recommendations for the treatment of HCV. RIDOC is only treating very advanced cases. The HCV committee has recommended starting two patients on treatment this month. Director Wall was interviewed by the NY Times and the Providence Journal on this issue. The RIDOC will continue to demonstrate responsibility and Dr. Vohr will remain in communication with Administration on treatment courses.

AD Weeden sent out a 79 page report regarding abuse and brutality on juveniles at Rikers. One major issue of point, such abuse was witnessed by Medical personnel and not reported. This report is only the tip of the iceberg on this investigation.

Dr. Vohr will be away Aug 14-20 at the ACA in Utah. He will have VPN access for emails and is available via cell for emergencies. Dr. Clarke will be covering for administrative needs: Non Formulary requests, furloughs and Ms. Marcussen will provide her access to the office. Ms. Paquette will also be out of the office at this time. He will also be out of the office the week of Labor day; and again September 10-14 to attend the CCHA meeting in Arizona.

Health Information: Ms. Marcussen

Medicaid claims:

The DOC has not paid any inpatient claims since the first of the year. Medicaid applications have been filed with the Pawtucket office of DHS however DHS reportedly signed an opt out with CMS and will only reimburse items less than 90 days old.

Addendum: HHS approved all applications and will pay the older bills.

Ms. Marcussen has been very busy working with the AGs office on a medical malpractice suit; providing medical records and interrogatory responses.

The vendor for the EMR upgrade will be onsite Aug 20 & 21 in Adm A. Dr. Vohr will be available on Aug 21 and asked to have time to meet and view the product. Ms. Marcussen is awaiting the necessary hardware, backup servers and the needed 200 PCs to support this upgrade. She noted that an EMar will interface with the product if one is obtained in the future.

Mr. Marocco notified Ms. Hill that funding for the Emar is very important. Dr. Vohr agrees this is necessary to prevent many medication errors that occur and will help to reduce costs in the long run. Ms. Marcussen stated in the 5 years that the EMR has been utilized; the startup costs have been acquired in decreased malpractice suits.

Ms. Marcussen begins her vacation Aug. 8 and will be returning on Aug 18. In her absence, Tonya Dana will assist with reports and can be reached at ext. 23881; Mr. Bouchard and Mr. Marocco will be available to assist with administrative issues that may arise.

Administration:

Director Wall has appointed Barry Weiner as Acting AD Rehab Services. He was recently hired at the DOC as Associate Director of Community Corrections. Dr. Vohr has offered his support and asks that managers assist and copy the Acting AD on communications which would normally have been copied to AD Earls.

Meeting adjourned at 2:50 p.m.

Next meeting: August 28, 2014 at 1:30p.

Healthcare Services Managers Meeting
August 28, 2014
Minutes

Present: Fred Vohr, MD MPD; Joseph Marocco, Assoc. Director HCS; Louis Cerbo, Clinical Director Behavioral Health; Gordon Bouchard, DON; Pauline Marcussen, IPM Health Information; Patricia Threats, PHES; Lauranne Howard, Substance Abuse Coordinator; Barry Weiner, Acting AD Rehabilitative Services.

Excused: Michelle Branch, Supervising Psychologist
Recorder: Maggie Paquette

The meeting was convened at 13:30.

Dr. Vohr announced he will be on vacation 8/30-9/7. Dr. Clarke will cover administratively and will cover the PAQ requests. He will be in Northwest ME and will have limited access to email and phone. He will be out of the office to attend the NIC meeting in AZ 9/10-9/12.

A synopsis of the ACA meeting he attended was provided.

In the recent issue of CorrectCare, the NCCHC view on Mental Illness in prisons was addressed Dr. Cerbo was asked to provide an update. Dr. Cerbo stated there is a major change with implementation of DSM 5-Mental Disorders which identifies mental illness on one sole axis eliminating multi-axis diagnoses. State statute defines mentally ill to include impaired cognition, mood, affect and perception; The Federal Bureau of Prisons is advocating that Transgender dysphoria be transferred to an Endocrine disorder and not listed as a mental illness.

Behavioral Health: Dr. Cerbo

HSC is very busy. JN returned from ISC to HSC and has stabilized. He was downgraded to CMS status and will be seen by psychiatry today. RZ is due to flatten in less than a month and most likely will be involuntary committed to ESH. The first Wednesday of the month Dr. Cerbo, Dr. Vohr and others meet with BHDDH Forensic staff. Forensic staff pushed to get RZ into a group setting upon release from DOC, however all CMHCs who reviewed his case refused to service him. The DOC cannot hold an individual longer than the sentence flatten date. He will be presented at court for an involuntary commitment and if such does not occur before his flatten date he would need to be sent to acute care facility until the process is complete.

Staffing: Ms. Branch is out on Military leave. Mr. Box exercised a 6 mo. LTPS and transferred to Adult Counselor his position has not been posted. There will be social work coverage at ISC during the Labor Day holiday. CNS Hughes will cover 3 days of Dr. Bauermeisters' vacation 9/4-9/9.

The DOJ has set a 7 day limit for segregation of the mentally ill. Discussion on how to best implement at HSC has been on going.

Substance Use Disorder Treatment: Ms. Howard

Recovery Rally List of Upcoming Events

- **8/29/14** - Kick- Off at Barry Hall 10-12. Two inmates from WF will speak at the kick off rally.
- **9/17/14** - Men's Med 8:45 a.m. closed event
- **9/17/14** - Men's Min 2:30-4:00 closed event
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The intake survey for the awaiting trial population has concluded. A meeting to be held later today will discuss the data and how to extract for the DOC's need.

The Providence Center waiting list census at Medium Moran has leveled however there is a wait list of 90 at Minimum. After Labor Day TPC will move 1 FTE from Medium to Minimum as there is a need to service those who will soon be discharged. TPC will monitor the impact of this change and adjust accordingly if necessary

Dr. Vohr and Ms. Howard met with Dr. Heather Cassidy to discuss a resident rotation for Substance Use Disorder education. Dr. Cassidy is Education Coordinator for Internal Medicine program at Lifespan/Brown and is very ambitious on implementing an aggressive education program to residents.

Ms. Howard will be on vacation September 1-5.

Health Care Administration: Mr. Marocco

VNA-NE will conduct the employee flu clinic this year. They will schedule flu clinics 3 days during the week of October 20 and will be held at the Training Academy.

Contract Updates:

1) Dental Service RFP. The cost proposals were reviewed with Ms. Hill and Legal. The choice vendor will actually cost less than current costs and will include digital x-ray services in their 5 year contract. Services should be in place by mid-November. Ms. Marcussen believes the scanned digital images could be hosted on the EDR server. Production is key focus for this vendor. The vendor will have complete management over the dental program. The two state dental personnel will remain employed in their current position.

2) The Optician RFP has posted.

3) The Pharmacy RFP may end up out for rebid. There was a difference of 0.2 in the scores between the top two vendors. A clarification notice was sent and the vendor responses even further convoluted the decision.

Updates:

ADIL notified Mr. Marocco they suspended a NP and a Dentist due to failure to provide requested documentation. Both individuals were reinstated once documentation was provided.

Four RIDOC employees took the CCHP certification exam. These individuals paid \$165.00 to sit for the exam and came in on their own time to test. Dr. Vohr asked if the State is able to reimburse these individuals for the examination fee. AD Weiner will inquire if reimbursement is possible.

Healthcare Services relocation from Medium Moran to DIX should occur in December. The Medical Supply unit needs to move out of the Pinel building. Mr. Marocco met with Mr. Feole and Ms. Brodeur to work on a solution. Temporarily, Medical Supplies will be moved to the CDC Annex and within 18 months when another space is renovated, a final move will occur. Ms. Marcussen suggested URI Pharmacy should sit in on such planning meetings due to security and proper storage needs of medications.

Nursing: Mr. Bouchard

A nurse who has been out on long term workers comp will return to work September 21 and will attend NEO on October 13. She will receive orientation to the EMR and buildings similar to such provided to a new employee, due to the length of time out of work.

Mr. Bouchard along with Dep. Warden McCaughey, have been reviewing NP Warren's special need requests for inmates at Medium. NP Warren has ordered cervical pillows and diabetic shoes, items which have been rejected. Mr. Bouchard requested Dr. Vohr address these issues with NP Warren. Practitioners should not be ordering diabetic shoes. If a podiatrist orders specialized shoes, they are purchased by the DOC. Inmates can purchase sneakers in the commissary, including wide width shoes. NP Warren's special needs requests have dwindled. Orders for bottom bunks for acute illnesses have and appropriate length of order. Any special needs items that are denied by security, the ordering practitioner must go back into the

EMR and reject the order. Ms. Marcussen state that a rejected order in the EMR is identified by a red X and such symbol does not mean to delete.

Medical: Dr. Vohr

Inmate Status:

There were 2-3 days in a row that no inmates were hospitalized; Currently RA is at the hospital with a compromised leg.

Discussion to provide AD Weiner a history of the possible establishment of a 5-6 bed chronic care area at Medium occurred. It was explained there are some aged, infirmed individuals with chronic needs at Medium who do not meet criteria for Medical Parole but would be managed better if a chronic care unit could be established. AD Weiner will discuss with Administration.

Audits: Medium audit is complete; Minimum audit remains a work in progress; and HSC Medical audit has not occurred. It was note the Security audit occurred at HSC this week. Ms. Marcussen requested the TPC services audit for Minimum be forwarded by Ms. Howard so such data could be included in the audit report.

HCV: Adm Kendig, MD from the BOP presented at the ACA and stated no inmate should be denied treatment. He advised participants to prioritize treatment based on the severity of the disease and comorbidities. RIDOC is assessing who has HCV and only treating very advanced cases.

A CT inmate cleared the virus in 3-4 weeks; one RIDOC inmate was started on treatment and one other who was set to start on treatment fell ill and needs to have his comorbid condition stabilized prior to starting treatment.

The joint HCV guidelines from the Infectious Disease Society of America and American Association for the Study of Liver Disease are available at HCVguidelines.org. Dr. Vohr noted this is the first drug that kills the virus; new drugs which are pan-geotypic are set to be released October 8th. The newer treatments require little lab intervention. Currently a viral load is recommended following 4 weeks of treatment and one at the end of therapy.

Health education has been provided by Ms. Threats who also has been coordinating this infectious disease clinic. The message that no one is omitted from assessment and treatment, however individuals will be prioritized based on severity of their disease state and comorbid factors for treatment. Tight control needs to occur for HCV patient identification and subsequent treatment prioritization.

Health Information: Ms. Marcussen

Some practitioners (psychiatrists and contractors) are not reviewing their PAQ. Dr. Vohr will send out a message reminding them to do so.

Onsite specialty clinics are crowded and there are many individuals waiting to be seen. A suggestion to have one day per week solely designated for specialty clinics at Medium and primary care clinics would not be held. Other days a mix of primary care and specialty clinics could still occur.

Ms. Marcussen has 4 FTE medical records clerks, 1 FTE medical claims representative and 1 FTE medical records supervisor. All have huge workloads and are only allowed 2 hours of OT per week. They are behind. She inquired if there was any way to allocate more OT for her employees.

EMR Upgrade: Jeff Auerback was onsite recently to meet with members of the core group. He will return 4 times between now and the December 10th go live date. A regularly scheduled conference call occurs to keep this project moving forward. The core group continues to identify DOC programming needs. When the upgrade occurs, a fix to the fax server will also occur. Hardware has arrived: 250 new PCs with appropriate RAM; information is still needed on servers for storage and back up needs.

Public Health Education: Ms. Threats

There were two active MRSA cases at Medium which have been treated. It is imperative the hand sanitizer dispensers are filled within all buildings. Panache Soap an Airwick product is effective in controlling MRSA. The last of the Panache supply was utilized at Minimum. Ms. Threats recommends installation of dispensers in all showers with a product Panache or HibacLens that kills MRSA for inmates use.

There is an increase in the number of STDs presenting with new commits at WF; especially Gonorrhea. A few chlamydia cases at Minimum and Intake.

There was one new HIV infected individual identified at Minimum. Further lab work was ordered. The individual requested not to see Ms. Threats and the HIV doctors due to the stigma of HIV. DOH interviewed the individual.

Ms. Threats and Ms. Davis continue to provide blood borne training to porters.

Overdose prevention presentations have been scheduled for September.

Administration:

A temporary solution to a medical waste issue was discussed at a meeting held prior to this. Medical waste and pharmacy blister packs should be red bagged (biohazard) for incineration. Further discussion to obtain a more permanent solution to rid of wastes, eliminate patient identifiers and disposal of medications and containers will occur. URI Pharmacy experts should be included in discussions for input relating to pharmaceuticals.

Shred-It or another vendor that holds the MPA for shredding solutions could be contracted to shred blister packs. Such service could also be beneficial for the destruction of medical records.

Meeting adjourned at 2:50 p.m.

Next meeting: September 18, 2014 at 1:30p.